## ISSUE SLIP STAPLE (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
			- li
FEE DETERMINATION	510	-11058	4/1/00
O.I.P.E. CLASSIFIER			514-15-00
FORMALITY REVIEW	DMIL	65165	6-10-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ Rejected	N Non-elected
=Allowed	interference
<ul> <li>(Through numeral) Canceled</li> </ul>	A Appeal
÷ Restricted	O Objected

Claim · · · · · · Date	Claim Date	Claim Date
निवास स्थान	<del></del>	
Claim Date	Onghat Onghat	Original
[E		
	51	101
2//////////////////////////////////////	52	102
3/11	53	1005
4/	54	104
5/////////	55	106
6//////////////////////////////////////	56	106
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	58	108
97, 11	59	100
10/	60	110
	61	hii .
12/11/11	62	112
	63	113
	65	115
15 /	66	116
16 /		117
2/11	67	115
	68	
19 /	69	119
20 / _ /	70	120
21	71	121
22	72	12
7 23 7	73	123
24	74	124
25	75	12
26	76	126
27		127
28	178	128
29	79	129
30	80	h30
31 + + + + + + + + + + + + + + + + + + +		ren
	82	h32
32	83	1 2 1 1 1 1
35		
34	84	135
35	85	136
36	86	
37	97	137
38	88	138
39	89	139
40	90	h4 <b>d</b>
41	91	141
42	92	142
0 1 1 1 1	93	
44	94	144
, 45	95	145
46	96	146
, 67	97	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
48	98	1 148
49	99	148
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If more than 150 claims or 10 actions staple additional sheet here

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